



City of Mountain House Building Division

251 E. Main Street, Mountain House, CA 95391

Phone: (209) 831-5037

Website: mountainhousecsd.org Email: mhbuilding@sjgov.org

Application Date: _____

Received Stamp: _____

Revisions Application

This form is to be filled out if you are revising any current Building Permit or Plan Review
(Must be complete, legible and accurate)

Current Building Permit Number: _____

Revision Description: _____

Job Address: _____ City: _____

Project Sq. Ft. Revision: _____ Revision "ONLY" Valuation: _____

Job Contact: _____ Phone: _____

Owner Name: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Contractor: _____ Phone: _____

Address: _____ City: _____ Zip: _____

SIGNATURE

I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION IS CORRECT. I AGREE TO COMPLY WITH ALL CITY AND COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEARBY AUTHORIZE REPRESENTATIVES OF THE CITY OF MOUNTAIN HOUSE TO ENTER THE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

PRINT APPLICANT OR AGENT NAME: _____

APPLICANT OR AGENT SIGNATURE: _____ DATE: _____

ADDITIONAL PERMIT FEES

| | | | | | |
|-----------------|----|------------|----|--------------------|----|
| Building Permit | \$ | Plan Check | \$ | Planning | \$ |
| | | | | BALANCE DUE | \$ |

(Office Use Only) APPROVED BY: _____